

Adopted at Meeting of 5/7/58

RESOLUTION PROVIDING FOR THE PAYMENT OF RELOCATION

PAYMENTS TO BUSINESS CONCERNS,

U. R. MASS. 2-3

WHEREAS, the Boston Redevelopment Authority has entered into a Loan and Grant Contract, U. R. Mass. 2-3, dated January 29, 1958 with the Housing and Home Finance Agency, a division of the United States Government; and

WHEREAS, pursuant to Section 106 (f) of the Housing Act of 1949, as amended, and pursuant to said Loan and Grant Contract and pursuant to regulations issued by the Urban Renewal Commissioner of said Housing and Home Finance Agency, the Local Public Agency may make relocation payments to eligible business concerns displaced by an urban renewal project.

WHEREAS, the Local Public Agency has by informational statement and other communication addressed to business concerns occupying property within the project area notified such business concerns in conformance with the provisions of this resolution that: (a) of the availability of relocation payments, and (b) where the written conditions under which relocation payments will be made are available.

NOW, THEREFORE, BE IT RESOLVED by the Boston Redevelopment Authority as follows:

Section 1. The Authority hereby elects the option of making relocation payments to eligible business concerns, pursuant to Section 106 (f) of the Housing Act of 1949 as amended.

Section 2. In determining eligible relocation expense, the following words shall be construed to mean,

(a) Property. Tangible personal property, excluding trade fixtures, machinery, and other property which under state or local law is identified as real property, but including such items of real property as the lessee may remove by virtue of a previous written agreement with the lessor.

(b) Moving expenses. Moving expenses shall be inclusive of dismantling, crating, insuring, transporting, reassembling, reconnecting, and reinstalling of personal property, merchandise, etc., exclusive of the cost of any additions, improvements, alterations, or other physical changes in or to any structure in connection with effecting such reassembly, reconnection or installation.

(c) Actual direct loss of property. With respect to such property as equipment, fixtures, machinery, supplies, and materials (but not goods kept for sale), the difference between (1) the fair market value for continued use at the present location, and (2) the fair market value delivered to another location. Does not include losses sustained as a result of property damaged during a move.

Section 3. The Authority shall pay its proportionate share of administering the relocation program as part of an eligible project expenditure.

Section 4. The Authority reserves the right to deny a claim of an otherwise eligible business concern which has defaulted in its obligation to the Authority.

Section 5. The Authority will not pay the cost of any appraisal made to determine actual loss of property if made by or in behalf of the claimant. If the Authority expends money for such appraisal work, such expenditure shall be part of its pro rata share of the project cost.

Section 6. Any business concern seeking relocation payments shall file a written claim for same on forms furnished by the Authority at the Site Office located at 25 Blossom Street, Boston, Massachusetts. All such papers and related evidence shall become the permanent records of the Authority.

Section 7. Temporary on-site moves which clearly are made for the convenience of the Authority in order to effect monetary savings in project costs shall not be eligible for relocation payments but shall be considered a project expenditure. Any other on-site moves shall be charged against the occupant's maximum allowable relocation payment.

Section 8. Business concerns which are displaced by the project and who move on or after the date of taking of said project by eminent domain may be eligible for relocation payment if the property from which they were displaced was part of the project area.

Section 9. Any claim for relocation payments must be submitted to the Authority within a reasonable period of time after the related moving expense has been incurred or direct loss of property is suffered. (in no event to exceed six (6) months)

Section 10. Disbursements that are not eligible as Relocation Payments include, but are not limited to, the following:

- (a) Disbursements made prior to the effective date.
- (b) Disbursements made after the effective date for moving expenses or losses incurred prior to the effective date.
- (c) Disbursements to business concerns which moved prior to acquisition by the Authority of the property which they occupied.
- (d) Disbursements to displacees from property not acquired by the Authority.
- (e) Disbursements for any rent, for loss of goodwill or profit, or for any costs other than necessary moving expenses or actual direct losses of property.
- (f) Disbursements for expenses or losses for which reimbursement or compensation is otherwise made.
- (g) Disbursements where displacement results from either code enforcement activities or voluntary rehabilitation and conservation program.
- (h) Disbursements for expenses of a claimant in preparing and supporting its claim.

Section 11. All claims shall be made on Housing and Home Finance Agency Form H-6140 (attached hereto) and shall be approved by the Project Manager, John J. Hallisey, or, in his absence, by the Assistant Project Manager, James J. Dazzi.

AMENDMENT NO. 1
Adopted at Meeting of 7/29/59

VOTED: that the Executive Director or, in his absence, the Assistant Executive Director, be authorized to waive the six-month requirement for filing applications for relocation payments where warranted.

CLAIM FOR RELOCATION PAYMENT

NAME AND ADDRESS OF LOCAL PUBLIC AGENCY		PROJECT NAME
		PROJECT NUMBER

Individuals and families claiming FIXED PAYMENTS are to complete Items 1 through 6 and Item 12 before this claim will be processed for payment. All other claimants are to complete all items numbered 1 through 12 before this claim will be processed for payment. Where an item that is to be completed does not apply, write "None" in the space.

PENALTY FOR FALSE OR FRAUDULENT STATEMENT. U.S.C. Title 18, Sec. 1001 provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies . . . or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both."

1. FULL NAME OF CLAIMANT	2. DATE(S) OF MOVE
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3. ADDRESS FROM WHICH YOU HAVE MOVED a. Address b. Apt., Floor, or Room No. _____ c. Was it furnished with your own furniture? <input type="checkbox"/> YES <input type="checkbox"/> NO d. Number of rooms occupied (<i>excluding</i> bathrooms, hallways, and closets): _____	4. ADDRESS TO WHICH YOU HAVE MOVED a. Address b. Apt., Floor, or Room No. _____
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5. TYPE OF PAYMENT CLAIMED (*Check one box after consulting Local Public Agency regarding local practice*)

☐ a. Reimbursement for actual moving expense and/or direct loss of property

☐ b. Fixed Payment

6. TOTAL CLAIM (<i>If claim is for Fixed Payment, consult Local Public Agency. If claim is for reimbursement of actual expenses and/or losses, enter sum of Lines 11a and 11b below.</i>)	\$
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DO NOT COMPLETE ITEMS 7 THROUGH 11 IF THIS IS A CLAIM FOR FIXED PAYMENT

7. NAME OF MOVING COMPANY (OR PERSON)	8. MOVER'S TELEPHONE NO.	9. ADDRESS OF MOVING COMPANY (OR PERSON)
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10. METHOD OF PAYMENT, MOVING BILL (*Check one*)

☐ I have paid the moving charges, as evidenced by the attached itemized receipt or paid bill from the mover, and I therefore request reimbursement.

☐ I have not paid the moving charges, and I therefore request that the attached itemized moving bill be paid directly to the mover, in accordance with arrangements made in advance, and with my consent, between the Local Public Agency and the mover.

11. AMOUNT OF ACTUAL COST AND/OR LOSS	
a. COST OF MOVING (<i>Must be supported by attached receipt(s) or unpaid voucher from mover if Local Public Agency is to pay mover directly.</i>)	\$
b. DIRECT LOSS OF PROPERTY CLAIMED (<i>If any claim is made here, the Statement of Claims on reverse side of this form must be completed.</i>)	\$

12. I certify (a) that any movers' bills or receipts attached hereto accurately reflect moving services actually performed, and (b) that all other information submitted herewith or included herein is true and correct. I further certify that this represents my entire claim for a Relocation Payment to be made under Federal law and solely out of Federal funds, and that payment has not been received. I understand that falsification of any item in this claim may result in forfeiture of the entire claim.

Date _____

Signature _____

(Over)

Each item of property for which an actual direct loss is claimed, and for which reimbursement or compensation is not otherwise provided, is to be listed below, and the indicated information with respect to each item is to be given below. Any appraisals, estimates, statements of value, or other evidence of estimated value or price received for property sold must be attached to this claim. Attach additional sheets as necessary.

DESCRIPTION OF PROPERTY	BASIS FOR AMOUNT CLAIMED (<i>Explain fully, referring to any attached statements</i>)	FAIR MARKET VALUE		AMOUNT CLAIMED	(FOR LPA USE) AMOUNT APPROVED
		FOR CONTINUED USE AT PRESENT LOCATION	DELIVERED TO ANOTHER LOCATION		
		\$	\$	\$	\$

I CERTIFY that I have examined this claim and the documents required to substantiate it and have found the claim to be in accord with the applicable provisions of Federal Law, the Rules and Regulations issued by the Housing and Home Finance Administrator pursuant thereto, and the pertinent Federal Contract. Therefore, this claim is hereby approved and payment is authorized as follows:

TO BE COMPLETED BY LOCAL PUBLIC AGENCY

PAYMENT(S) MADE IN SETTLEMENT OF CLAIM	CHECK NO.	AMOUNT

Authorized Signature

Date _____

CPD 866822